



# TRANSMITTAL FORM

Application Serial Number	10/084,403
Filing Date	February 25, 2002
First Named Inventor	Salmonsens
Group Art Unit	2123
Examiner Name	Guill, Russell L.
Attorney Docket No.	PXL-047
Patent No.	Not applicable
Issue Date	Not applicable

## ENCLOSURES (check all that apply)


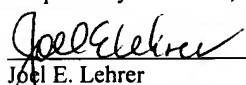
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form  <input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]  <input checked="" type="checkbox"/> Petition for Extension of Time  <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application  <input type="checkbox"/> Formal Drawing(s)  <input checked="" type="checkbox"/> Request For Continued Examination (RCE) Transmittal  <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> CD(s) for large table or computer program  <input type="checkbox"/> Amendment After Allowance  <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences  <input type="checkbox"/> Appeal Brief (in triplicate)  <input type="checkbox"/> Status Inquiry  <input checked="" type="checkbox"/> Return Receipt Postcard  <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8  <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8  <input type="checkbox"/> Additional Enclosure(s) (please identify below)
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## CORRESPONDENCE ADDRESS

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 Boston, MA 02109  
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 Fax No.: (617) 523-1231  
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## SIGNATURE BLOCK

Respectfully submitted,  
 Date: June 8, 2006  
 Reg. No. 56,401  
 Tel. No.: (617) 570-1057  
 Fax No.: (617) 523-1231  
 Joel E. Lehrer  
 Attorney for Applicant  
 Goodwin Procter LLP  
 Exchange Place  
 Boston, MA 02109

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<b>1. METHOD OF PAYMENT</b> 1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other 2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 07-1700. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit. 3. <input type="checkbox"/> Applicant claims small entity status.		<b>2. FEE CALCULATION</b> <b>1. FILING/SEARCH/EXAM/SIZE FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Large Entity Fee (\$)</th> <th style="width: 45%;">Fee Description</th> <th style="width: 40%;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>300</td><td>Utility filing fee</td><td></td></tr> <tr><td>500</td><td>Utility search fee</td><td></td></tr> <tr><td>200</td><td>Utility exam fee</td><td></td></tr> <tr><td>250</td><td>Utility size fee (each add'l 50 pgs. over 100)</td><td></td></tr> <tr><td>200</td><td>Design filing fee</td><td></td></tr> <tr><td>100</td><td>Design search fee</td><td></td></tr> <tr><td>130</td><td>Design exam fee</td><td></td></tr> <tr><td>250</td><td>Design size fee (each add'l 50 pgs. over 100)</td><td></td></tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Number Filed</th> <th style="width: 15%;">Number Extra</th> <th style="width: 15%;">Rate</th> <th style="width: 55%;">Amount</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>- 20 =</td> <td>x \$ 50.00 =</td> <td></td> </tr> <tr> <td>Independent Claims</td> <td>- 3 =</td> <td>x \$200.00 =</td> <td></td> </tr> <tr> <td colspan="3"> <input type="checkbox"/> Multiple Dependent Claim(s), if any      \$360.00 =             </td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">TOTAL:</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (1)</td> <td style="text-align: right;">(\$)</td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (1)</td> <td style="text-align: right;">0.00</td> </tr> </tbody> </table> <b>2. 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I)		200	200	Petitions to the Commissioner (Gp. II)		130	130	Petitions to the Commissioner (Gp. III)		180	180	Submission of Information Disclosure Statement		790	395	Filing a submission after final rejection (37 CFR 1.129(a))		790	395	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		130	65	Submission of Terminal Disclaimer		Other fee (Specify) _____				Other fee (Specify) _____							790.00	SUBTOTAL (3)			(\$)	SUBTOTAL (3)			910.00	SUBTOTAL (1)	0.00	SUBTOTAL (2)	0.00	SUBTOTAL (3)	910.00	TOTAL (\$)		910.00	
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